

## DISEASE and INJURY REPORTING REQUIREMENTS: NEW JERSEY PHYSICIANS

CONDITION	REPORTING TIME-FRAME	REQUIRED REPORTING MECHANISM/FORM	AGENCY TO RECEIVE REPORT	PROGRAM CONTACT AT NEW JERSEY DEPARTMENT OF HEALTH AND SENIOR SERVICES (NJDHSS)	TELEPHONE # AT NJDHSS
<b>INFECTIOUS DISEASES</b> (confirmed or presumed) <ul style="list-style-type: none"> <li>▶ <b>Anthrax (<i>Bacillus anthracis</i>)</b></li> <li>▶ <b>Botulism (<i>Clostridium botulinum</i>)</b></li> <li>▶ <b>Brucellosis (<i>Brucella</i> spp.)</b></li> <li>▶ <b>Diphtheria (<i>Corynebacterium diphtheriae</i>)</b></li> <li>▶ <b>Haemophilus influenzae, invasive disease</b></li> <li>▶ <b>Hantavirus</b></li> <li>▶ <b>Hepatitis A, institutional settings</b></li> <li>▶ <b>Measles</b></li> <li>▶ <b>Meningococcal disease (<i>Neisseria meningitidis</i>)</b></li> <li>▶ <b>Pertussis (whooping cough, <i>Bordetella pertussis</i>)</b></li> <li>▶ <b>Plague (<i>Yersinia pestis</i>)</b></li> <li>▶ <b>Poliomyelitis</b></li> <li>▶ <b>Rabies (human illness)</b></li> <li>▶ <b>Rubella</b></li> <li>▶ <b>Smallpox</b></li> <li>▶ <b>Tularemia (<i>Francisella tularensis</i>)</b></li> <li>▶ <b>Viral hemorrhagic fevers, including, but not limited to, Ebola, Lassa, Marburg viruses</b></li> </ul>	<b>Diseases in bold must be reported immediately by telephone.</b> Other diseases must be reported within 24 hours of diagnosis	By telephone/ written report, within 24 hours, on "Communicable Disease Report (CDC-1)" form – available from NJDHSS Program	Your Local Health Department* except for syphilis and TB (see p. 2)	Communicable Disease Service 3635 Quakerbridge Rd. P.O. Box 369 Trenton, NJ 08625-0369	609) 588-7500 (business hours)  (609) 392-2020 (after business hours)
* To obtain the name of your Local Health Department go to <a href="http://www.state.nj.us/health/lh/olh.htm">www.state.nj.us/health/lh/olh.htm</a> or call (609) 588-7500 (NJDHSS, Communicable Disease Service)					

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<p><i>INFECTIOUS DISEASES (con't)</i></p> <ul style="list-style-type: none"> <li>▶ <b>Foodborne intoxications, including, but not limited to mushroom poisoning</b></li> <li>▶ <b>Any outbreak or suspected outbreak, including, but not limited to, foodborne, waterborne, or nosocomial disease or a suspected act of bioterrorism</b></li> <li>▶ An enteric disease, either in a child who attends a day care center or in a food handler</li> <li>▶ Hemorrhagic colitis</li> <li>▶ Hepatitis B surface antigen test positive in a pregnant woman</li> <li>▶ Hepatitis C</li> <li>▶ Kawasaki disease (mucocutaneous lymph node syndrome)</li> <li>▶ Lyme disease</li> <li>▶ Mumps</li> <li>▶ Syphilis, primary and secondary</li> <li>▶ Chlamydia</li> <li>▶ Gonorrhea</li> <li>▶ Tuberculosis</li> </ul>	<p><b>Diseases in bold must be reported immediately by telephone.</b> Other diseases must be reported within 24 hours of diagnosis</p>	<p>By telephone/ written report, within 24 hours, on "Communicable Disease Report (CDC-1)" form – available from NJDHSS Program</p> <p>In writing, on "Confidential sexually transmitted disease report (STD-11)" form - available from NJDHSS Program</p> <p>In writing on "Tuberculosis case, suspect and status report (TB-70)" form - available from NJDHSS Program</p>	<p>Your Local Health Department* except for syphilis and TB</p> <p>STD Program NJDHSS 3635 Quakerbridge Rd P.O. Box 369 Trenton, NJ 08625-0369</p> <p>TB Program NJDHSS 3635 Quakerbridge Rd P.O. Box 369 Trenton, NJ 08625-0369</p>	<p>Communicable Disease Service 3635 Quakerbridge Rd. P.O. Box 369 Trenton, NJ 08625-0369</p> <p>STD Program (same address)</p> <p>TB Program (same address)</p>	<p>609) 588-7500 (business hours)</p> <p>(609) 392-2020 (after business hours)</p> <p>609) 588-7526 Fax: (609) 588-7462</p> <p>(609) 588-7522</p>

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<b>ANIMALS BITES</b>					
▶ All animal bites	Within 12 hours of professional attendance	By telephone	Your Local Health Department*	Infectious and Zoonotic Program Veterinary Public Health 3635 Quakerbridge Rd. P.O. Box 369 Trenton, NJ 08625-0369	(609) 588-3121
▶ Animal bites treated for rabies	Within 24 hours of completion of treatment	In writing, on "Report of rabies post-exposure treatment (CDC-2)" form (Mailed or faxed) – available from NJDHSS Program	Your Local Health Department*	Infectious and Zoonotic Program Veterinary Public Health 3635 Quakerbridge Rd. P.O. Box 369 Trenton, NJ 08625-0369	(609) 588-3121
<b>AIDS AND HIV INFECTION**</b>					
HIV Infection A positive result on a highly specific (confirmatory) licensed test for HIV or viral load test	Within 24 hours after receipt of laboratory report	In writing, on "HIV/AIDS Confidential Case Report" form – available from NJDHSS Program	Surveillance Unit NJDHSS P.O. Box 363 Trenton, NJ 08625-0363	HIV/AIDS Surveillance Unit (same address)	(609) 984-5940  Hotline: (800) 624-2377
Perinatal HIV exposure Child known to be perinatally exposed to HIV	(same)	(same)	(same)	(same)	(same)
AIDS Evidence of HIV infection and/or one of the 26 opportunistic infections associated with HIV, CD4+ T-lymphocytes count <200 cells/uL or a CD4+ percent <14	Within 24 hours after diagnosis	(same)	(same)	(same)	(same)

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\*\* For complete AIDS and HIV case definitions and other information, call (609) 984-5940 (NJDHSS HIV/AIDS Surveillance Unit)

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<b>OCCUPATIONAL AND ENVIRONMENTAL DISEASES AND INJURIES</b> <ul style="list-style-type: none"> <li>▶ Occupational Asthma</li> <li>▶ Asbestosis</li> <li>▶ Silicosis</li> <li>▶ Pneumoconiosis, other</li> <li>▶ Hypersensitivity pneumonitis</li> <li>▶ Lead, Cadmium, Mercury and Arsenic Toxicity; adult</li> <li>▶ Pesticide Toxicity</li> <li>▶ Work-related injuries in children</li> <li>▶ Work-related fatal injuries</li> <li>▶ Occupational dermatitis</li> </ul>	Within 30 days of diagnosis or treatment	In writing, on "Occupational Disease and Injury Report for Physicians" form (Mailed or faxed) – available from NJDHSS Program	Occupational Health Surveillance Program NJDHSS P.O. Box 360 Trenton, NJ 08625-0360	Occupational Health Surveillance Program (same address)	(609) 984-1863  Fax: (609) 292-5677
<b>CANCER*</b>  All confirmed or clinical diagnoses that include the following words: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <ul style="list-style-type: none"> <li>• Cancer</li> <li>• Malignant</li> <li>• Carcinoma</li> </ul> <ul style="list-style-type: none"> <li>• Sarcoma</li> <li>• Lymphoma</li> <li>• Leukemia</li> </ul> </div>	Within 6 months of diagnosis	In writing, on "Cancer Registry Physician Report Form (CES-40)" for any non-hospitalized cancer case - available from NJDHSS Program	NJ State Cancer Registry, NJDHSS P.O. Box 369 Trenton, NJ 08625-0369	Cancer Registry Program (same address)	(609) 588-3500  Fax: (609) 588-3638
<b>BIRTH DEFECTS</b>  All congenital birth defects (confirmed or suspect) diagnosed by age one	As soon as possible	In writing, on confidential "Special Child Health Services Registration (SCH-0)" form – available from NJDHSS Program	Special Child, Adult and Early Intervention Services, NJDHSS P.O. Box 364 Trenton, NJ 08625-0364	Special Child, Adult and Early Intervention Services (same address)	(609)292-5676 (business hours)  Fax: (609)292-3580

\* For the complete list of reportable cancers, see the New Jersey Sanitary Code (N.J.A.C. 8:57A-1.2) or call the Cancer Registry Program (609-588-3500)

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<i>CHILD ABUSE/NEGLECT</i>	Immediately	Reporting mechanism is by telephone 24 hour hotline 1-800-792-8610  Reports should include the following:  Names and addresses of the child and his/her parents, guardians, or other person(s) having custody or control of the child and if known, the child's age, the nature and the extent of the child's abuse as well as any other information that may be helpful with respect to the abuse and the identity of the assailant	Department of Human Services  Division of Youth and Family Services (DYFS)	Division of Family Health Services, Community Health Services; Child Health Program	(N/A)
<i>ABUSE/EXPLOITATION OF AN INSTITUTIONALIZED ELDERLY PERSON</i>	One business day	Telephone hotline (877) 582-6995	Ombudsman for the Institutionalized Elderly NJDHSS P.O. Box 807 Trenton, NJ 08625-0807	Office of the Ombudsman for the Institutionalized Elderly (same address)	(877) 582-6995 or (609) 588-3614  FAX (609) 588-3365